



**IT Security Procedural Guide:  
Risk Management Strategy (RMS)  
CIO-IT Security-18-91**

**Revision 4**

June 28, 2021

*Office of the Chief Information Security Officer*

**VERSION HISTORY/CHANGE RECORD**

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		<b>Revision 4 – June 28, 2021</b>		
1	Agosto/ Klemens/ Desai	Revised to include: <ul style="list-style-type: none"> <li>• Reorganized guide and added sections on Framing Risk, Risk Assumptions, and Risk Constraints.</li> <li>• Updated information on the Enterprise Management Board and subcommittees.</li> <li>• Included appendices for Acronyms and a Glossary.</li> <li>• Added information from NISTIR 8286, Integrating Cybersecurity and Enterprise Risk Management (ERM), and the Cybersecurity Risk Register</li> </ul>	Updated to align with DHS template and current NST and GSA guidance.	Throughout

## Approval

IT Security Procedural Guide: Risk Management Strategy (RMS), CIO-IT Security 18-91, Revision 4, is hereby approved for distribution.

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**Note:** Hyperlinks in this guide are provided as follows:

- Appendix A - References. This appendix contains hyperlinks to Federal Regulations/Guidance and to GSA web pages containing GSA policies, guides, and forms/templates.
- In running text – Hyperlinks will be provided if they link to a location within this document (i.e., a different section or an appendix). Hyperlinks will be provided for external sources unless the hyperlink is to a webpage or document listed in [Appendix A](#). For example, Google Forms, Google Docs, and websites will have links.
- It may be necessary to copy and paste hyperlinks in this document (Right-Click, Select Copy Hyperlink) directly into a web browser rather than using Ctrl-Click to access them within the document.

1 Introduction

The General Services Administration (GSA) Chief Information Security Officer (CISO) is responsible for implementing and administering an information security program to protect the agency’s information resources, support business processes and the GSA mission. The program must implement a mandatory set of processes and system controls per federal regulations, Executive Orders, including the Federal Information Security Modernization Act of 2014 (FISMA); the Office of Management and Budget (OMB) Circular A-130, and National Institute of Standards and Technology (NIST) Federal Information Processing Standards (FIPS) and Special Publications (SPs) documents to ensure the confidentiality, integrity, and availability of system related information and information resources.

To meet these requirements, GSA has implemented an agency-wide, risk-based information security program as defined in GSA CIO Order 2100.1, “GSA Information Technology (IT) Security Policy.” The agency policy provides requirements to support procedures, guidelines, and formalized processes coordinated through the Office of the Chief Information Security Officer (OCISO). These elements form the foundation for GSA’s information security program and define requirements for GSA systems and employees/contractors with significant security responsibilities, ensuring implementation of information security requirements.

CIO-IT Security-08-39, “FY21 IT Security Program Management Implementation Plan,” identifies the key information security activities and milestones (due dates) for managing enterprise-level risk for GSA information systems. The system specific requirements in CIO-IT Security-08-39 integrate into GSA’s broader enterprise risk management approach as depicted in the three-tiered figure below that depicts risk at the organization level; mission/business process level; and the information system level.

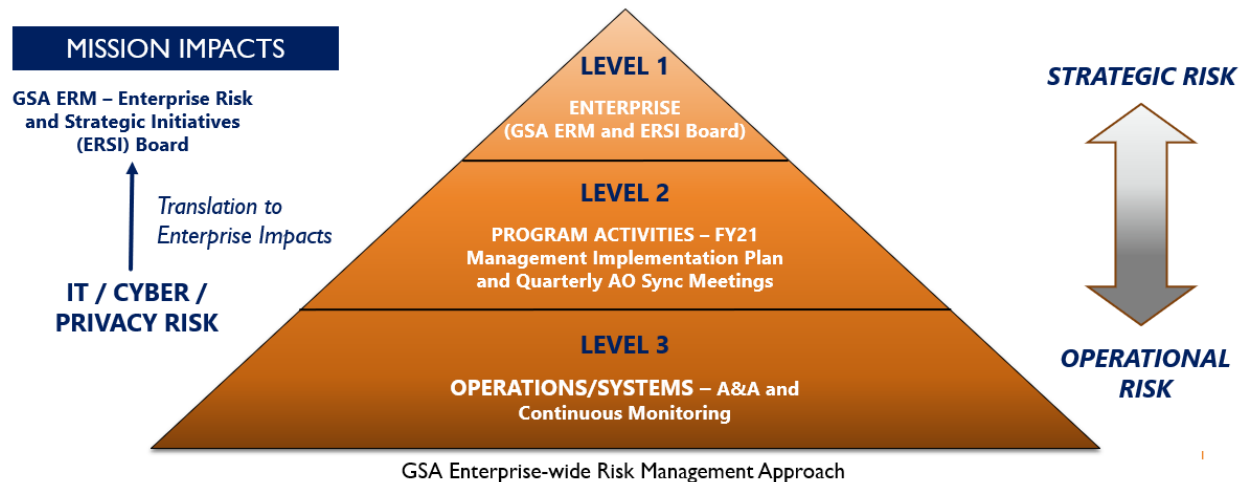


Figure 1. GSA Three-Tiered Risk Management Approach

Enterprise risk at the General Services Administration (GSA) is handled by the Enterprise Management Board (EMB), chaired by the Deputy Administrator, who is also the Senior Accountable Official for Risk Management (SAORM). For cybersecurity risks, the Chief Information Security Officer (CISO), Authorizing Officials, and subject matter experts facilitate the consistent application of risk management across GSA. The Enterprise Risk and Strategic Initiatives (ERSI) board identifies and monitors agency-wide risks and leads strategic initiatives to mitigate the risks and solve cross-cutting challenges. It fulfills the OMB A-123 requirement for “an agency-wide approach to addressing the full spectrum of the organization’s risk by considering the combined array of risk as an interrelated portfolio, rather than addressing risks only within silos.”<sup>1</sup>

As a collective governance body, the ERSI is broadly responsible for establishing enterprise risk management policies, identifying enterprise level risks and risk owners, approving and monitoring mitigation strategies and controls for these risks, and providing regular briefings to the Enterprise Management Board (EMB). The ERSI shall make recommendations to the EMB and identify opportunities to integrate risk with the Agency’s strategy, budget planning, and resource allocation decisions. These activities ensure that significant risks to the Agency are effectively managed consistent with the Agency’s risk appetite. The CISO coordinates with the Chief Information Officer (CIO), a member of the EMB, to identify cybersecurity risks for consideration by the EMB. This process satisfies the ERM capability required by Office of Management and Budget (OMB) Memo 16-17, “*OMB Circular No. A-123, Management's Responsibility for Enterprise Risk Management and Internal Control*,” and the Risk Executive (Function) identified in National Institute of Standards and Technology (NIST) Special Publication (SP) 800-39, “*Managing Information Security Risk: Organization, Mission, and Information System View*.”

NIST SP 800-39 describes the integration of the risk management process throughout an organization as occurring at three tiers: (1) organization level; (2) mission/business process level; and (3) information system level. The EMB addresses risk at all three tiers. At the system level, cybersecurity risks are handled by ISSO, ISSM, and System owner through the assessment and authorization process initially and then by information security continuous monitoring. At the mission/business process level risk is managed and maintained by AO and CISO as described in the Management Implementation Plan and quarterly AO sync meetings. As depicted in Figure 1, at the Organization level the ERSI integrates risk data from the lower levels and coordinates with the EMB as necessary to address enterprise risks.

NIST SP 800-53, Revision 5, “*Security and Privacy Controls for Information Systems and Organizations*” includes security control PM-9, Risk Management Strategy, which requires an organization to develop “*a comprehensive strategy to manage risk to organizational operations and assets, individuals, other organizations, and the Nation associated with the operation and use of information systems.*” The GSA OCISO Policy and Compliance Division (ISP) has developed and maintains this document, CIO-IT Security-18-91, to establish a comprehensive approach to

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<sup>1</sup> OMB Circular No. A-123, Management's Responsibility for Enterprise Risk Management and Internal Control, July 15, 2016, p 9.

managing risk to the operation and use of GSA information systems. GSA follows NIST guidance when assessing and managing information systems and security risk.

The primary NIST documents used by GSA in managing risk are:

- NIST SP 800-30, Revision 1, *“Guide for Conducting Risk Assessments”*
- NIST SP 800-37, Revision 2, *“Risk Management Framework for Information Systems and Organizations: A System Life Cycle Approach for Security and Privacy”*
- NIST SP 800-39, *“Managing Information Security Risk: Organization, Mission, and Information System View”*
- NIST SP 800-137, *“Information Security Continuous Monitoring (ISCM) for Federal Information Systems and Organizations”*
- NIST Cybersecurity Framework, *“Framework for Improving Critical Infrastructure Cybersecurity”*
- NIST 8286, *“Integrating Cybersecurity and Enterprise Risk Management (ERM)”*

Executive Order (EO) 13800, *“Strengthening the Cybersecurity of Federal Networks and Critical Infrastructure”* requires all agencies to use *“The Framework for Improving Critical Infrastructure Cybersecurity (the Framework) developed by NIST or any successor document to manage the agency’s cybersecurity risk.”* This NIST document is commonly referred to as the Cybersecurity Framework (CSF). The CSF complements, and does not replace, an organization’s risk management process and cybersecurity program. Further information on how the CSF relates to GSA’s use of the NIST Risk Management Framework (RMF), including the use of the NIST SP 800-30 risk assessment process in its overall risk management strategy, is provided in [Section 10](#).

The listed terms are defined as follows (from the NIST online glossary) when used throughout this guide, unless otherwise stated.

**Cybersecurity** - Prevention of damage to, protection of, and restoration of computers, electronic communications systems, electronic communications services, wire communication, and electronic communication, including information contained therein, to ensure its availability, integrity, authentication, confidentiality, and nonrepudiation.

**Cybersecurity Risk** - An effect of uncertainty on or within a digital context. Cybersecurity risks arise from the loss of confidentiality, integrity, or availability of information, data, or information (or control) systems and reflect the potential adverse impacts to organizational operations (i.e., mission, functions, image, or reputation) and assets, individuals, other organizations, and the Nation.

**Information Security Risk** - The risk to organizational operations (including mission, functions, image, reputation), organizational assets, individuals, other organizations, and the Nation due to the potential for unauthorized access, use, disclosure, disruption, modification, or destruction of information and/or information systems.



Information System - Related Security Risks - Risks that arise through the loss of confidentiality, integrity, or availability of information or information systems and consider impacts to the organization (including assets, mission, functions, image, or reputation), individuals, other organizations, and the Nation.

Risk Management - The program and supporting processes to manage information security risk to organizational operations (including mission, functions, image, reputation), organizational assets, individuals, other organizations, and the Nation, and includes: (i) establishing the context for risk-related activities; (ii) assessing risk; (iii) responding to risk once determined; and (iv) monitoring risk over time.

## 1.1 Purpose

This document provides a comprehensive approach for framing, assessing, responding to, and monitoring risks associated with GSA information systems in accordance with Federal laws, regulations, and requirements; and establishes GSA guidance and processes for all operating units and GSA Services and Staff Offices (S/SO) to follow.

The mission of GSA IT is to inspire and drive technology transformation by delivering innovative, collaborative, and cost-effective IT solutions and services to our customers. Our data is an invaluable asset that requires an enterprise-wide strategy which reflects the importance of the mission and guides executive decisions about risk.

## 1.2 Scope

This document establishes an integrated, comprehensive approach to identify, measure, and manage risk to GSA operations, assets, and individuals associated with the operation and use of GSA information systems.

## 2 Governance

GSA's EMB has as one of its focus areas the management of enterprise-wide risks. The EMB uses the following two documents to identify and monitor risk at the enterprise level. Access to the linked documents is restricted due the nature of their content.

- An enterprise [risk profile](#) to identify and monitor overarching enterprise risks.
- A [risk register](#) that is updated at least annually and the risks therein are discussed when the EMB meets as part of the agenda. The EMB risk register includes:
  - the organization where the risk resides;
  - a risk title and description;
  - a risk category, impact, likelihood, and overall risk;
  - a risk response with a description; and
  - a risk reduction description.

The EMB has designated the ERSI board to develop and manage ERM at GSA with resources from the Office of Strategy, Risk, and Performance Management (BIS). As depicted in [Figure 1](#) the ERSI board works as a conduit to raise risks from the operational/system and mission/business process levels to the enterprise for consideration by the EMB, as appropriate.

## 2.1 Roles and Responsibilities

The complete roles and responsibilities for agency management officials and others with significant IT Security responsibilities are defined fully in Chapter 2 of GSA Order CIO 2100.1. The following sections provide extracted or paraphrased key responsibilities from CIO 2100.1, or other GSA or Federal guidance, regarding managing risks associated with GSA information systems.

## 2.2 GSA Administrator

Responsibilities include the following:

- Developing and overseeing the implementation of policies, principles, standards, and guidelines on information security; including ensuring timely agency adoption of and compliance with security standards.
- Providing information security protections commensurate with the risk and magnitude of the harm resulting from unauthorized access, use, disclosure, disruption, modification, or destruction of information collected or maintained by or on behalf of an agency, and on information systems used or operated by an agency or by a contractor of an agency or other organization on behalf of an agency.
- Ensuring that an information security program is developed, documented, and implemented to provide security for all systems, networks, and data that support the operations of the organization.
- Ensuring that information security management processes are integrated with agency strategic and operational, and budgetary processes.
- Ensuring that the CIO, in coordination with the other senior agency officials, reports annually to the GSA Deputy Administrator on the effectiveness of the agency information security program, including the progress of remedial actions.

## 2.3 Risk Executive (Function)

The Risk Executive (Function) at GSA is handled by the EMB, chaired by the Deputy Administrator who is also the SAORM. For cybersecurity risks, the CISO, Authorizing Officials (AOs), and subject matter experts facilitate the consistent application of risk management across GSA. The ERSI board identifies cybersecurity risks for consideration by the EMB, which then, fulfilling the Risk Executive (Function), manages and monitors key organizational risks.

Responsibilities include the following:

- Providing a forum to identify and discuss cross-cutting strategic, reputational, regulatory, operational, cybersecurity, financial and other risks;
- Elevating new or emerging risks and communicating the status of existing risks, including ongoing mitigation efforts;
- Identifying risk owners and considering mitigation strategies and/or corrective actions;
- Maintaining and maturing GSA's risk management framework, including its risk tolerance thresholds, risk appetite, and enterprise risk profile;
- Engaging with other GSA governance groups, as needed, to provide strategic guidance;
- Establishing risk management roles and responsibilities;
- Developing and implementing an organization-wide risk management strategy that guides and informs organizational risk decisions (including how risk is framed, assessed, responded to, and monitored over time);
- Determining organizational risk based on the aggregated risk from the operation and use of information systems and the respective environments of operation; and

## 2.4 Chief Information Officer (CIO)

Responsibilities include the following:

- Developing and maintaining an agency-wide GSA IT Security Program.
- Establishing reporting requirements within GSA to assess GSA's IT security posture, verifying compliance with Federal requirements and approved policies, and identifying agency-wide IT security needs.
- Reporting annually, in coordination with the other senior agency officials, to the GSA Deputy Administrator on the effectiveness of the agency information security program, including progress of remedial actions.
- As a member of the EMB, coordinates along with other board members, with the ERSI regarding cybersecurity risks in relation to overall ERM at GSA.

## 2.5 Chief Financial Officer (CFO)

Responsibilities include the following:

- Ensuring the sufficiency of management and information security controls pertaining to GSA's financial management systems and compliance with Federal Managers' Financial Integrity Act (FMFIA) and Federal Financial Management Improvement Act (FFMIA) requirements.
- Developing and maintaining an integrated agency accounting and financial management system, including financial reporting and internal controls, which comply with FMFIA and FFMIA requirements;
- Ensuring that the appropriate security requirements of CIO 2100.1 are included in all contracts for IT systems designed, developed, implemented, and operated by a contractor that hosts GSA financial systems.

- As Performance Improvement Officer, co-chairs the ERSI, and with other board members integrates risk management into the strategic planning and decision-making processes.

## 2.6 Senior Agency Official for Privacy (SAOP)

Responsibilities include the following:

- Ensuring GSA information systems that contain Personally Identifiable Information (PII) address any recommendations of the SAOP as part of the system Assessment & Authorization (A&A), including addressing the privacy controls.
- Developing, implementing, and overseeing personnel security controls for access to PII.

## 2.7 Chief Information Security Officer (CISO)

Responsibilities include the following:

- Reporting to the GSA CIO on the implementation and maintenance of the GSA's IT Security Program and Security Policies.
- Implementing and overseeing GSA's IT Security Program by developing and publishing security policies and IT security procedural guides that are consistent with CIO 2100.1.
- Assessing risk and magnitude of the harm resulting from unauthorized access, use, disclosure, disruption, modification, or destruction of information and information systems supporting the operations and assets of the agency on a periodic basis.
- Testing and evaluating the effectiveness of information security policies, procedures, and practices on a periodic basis.
- Establishing and maintaining a process for planning, implementing, evaluating, and documenting remedial action to address any deficiencies in the information security policies, procedures, and practices of the agency.
- Developing and implementing IT security performance measures to evaluate the effectiveness of technical and non-technical safeguards used to protect GSA information and information systems.
- Administering Federal Information Security Modernization Act (FISMA) requirements and coordinating GSA's annual FISMA security program review and Plan of Action and Milestones (POA&M) implementation.
- Concurring/Non-concurring on Authorizations to Operate (ATOs) as specified in GSA CIO-IT Security-06-30, "*Managing Enterprise Cybersecurity Risk*," and its related A&A procedural guides.
- As co-chair of the ERSI, along with other board members, identifies, vets, and prioritizes enterprise risks and monitors them.
- Monitoring cybersecurity risks in the Cybersecurity Risk Register along with OCISO Directors and ISSMs/ISSOs.

## 2.8 Heads of Services and Staff Offices (HSSOs)

Responsibilities include the following:

- Ensuring adherence and proper implementation of GSA's IT Security Policy.
- Ensuring that the systems of record under their jurisdiction meet the requirements of the Privacy Act and GSA privacy policies and procedures.
- Ensuring that contractors performing services associated with GSA systems (such as system development, maintenance, or operation) are subject to GSA security requirements.

## 2.9 Authorizing Official (AO)

Responsibilities include the following:

- Identifying the level of acceptable risk for an IT system or application and determining whether the acceptable level of risk has been obtained.
- Reviewing and approving security safeguards of information systems and issuing ATO approvals for each information system under their jurisdiction based on the acceptability of the security safeguards of the system (risk-management approach).
- Ensuring GSA systems are assessed via operating system and web application scans as defined in CIO-IT Security-17-80, "*Vulnerability Management Process*." Identified vulnerabilities from the scans shall be resolved and tracked in the systems' POA&Ms in accordance with CIO-IT Security-09-44, "*Plan of Action and Milestones (POA&M)*," and CIO-IT Security-06-30.
- Working with the System Owners, ISSOs and ISSMs to monitor and manage risks identified for systems under their purview in the Cybersecurity Risk Register.

## 2.10 Office of CISO Division Directors

Responsibilities include the following:

- Monitoring adherence and proper implementation of GSA's IT Security Policy and reporting the results to the CISO.
- Reviewing and approving A&A documents to be signed by the appropriate business line representatives and concurred by the CISO or appropriate OCISO personnel.
- Assisting individuals with IT Security responsibilities on security architecture and security engineering principles and practices.
- Identifying and managing cybersecurity risks in the Cybersecurity Risk Register along with ISSMs/ISSOs and the CISO.

## 2.11 Information Systems Security Manager (ISSM)

Responsibilities include the following:

- Ensuring adherence and proper implementation of GSA's IT Security Policy.
- Reviewing and coordinating reporting of Security Advisory Alerts (SAA), compliance reviews, security and privacy awareness training, incident reports, contingency plan testing, and other IT security program elements.

- Managing system assessments (including A&A package requirements and Payment Card Industry Data Security Standard [PCI DSS] Report on Compliance [for IT systems that process, store, or transmit payment card data or purchase/credit card numbers]), and forwarding them to the AO and appropriate OCISO Directors.
- Identifying and managing cybersecurity risks in the Cybersecurity Risk Register along with ISSOs, OCISO Directors, and the CISO.

## 2.12 Information Systems Security Officer (ISSO)

Responsibilities include the following:

- Ensuring the system is operated, used, maintained, and disposed of in accordance with (IAW) documented security policies and procedures. Necessary security controls should be in place and operating as intended.
- Evaluating Security Advisory Alerts (SAAs) issued by the OCISO Security Operations Division and known vulnerabilities to ascertain if additional safeguards are needed, and ensuring systems are patched and securely configured, as appropriate.
- Advising system owners of risks to their systems and obtaining assistance from the ISSM, if necessary, in assessing risk.
- Working with the ISSM and system owners to develop, implement, and manage POA&Ms for assigned systems in accordance with CIO-IT Security-09-44.
- Identifying and managing cybersecurity risks in the Cybersecurity Risk Register along with ISSMs, OCISO Directors, and the CISO.

## 2.13 System Owners

Responsibilities include the following:

- Ensuring effective implementation of GSA's IT Security Policy.
- Consulting with the ISSM and ISSO and receiving the approval of the AO, when selecting the mix of controls, technologies, and procedures that best fit the risk profile of the system.
- Participating in activities related to the assessment and authorization of the system to include security planning, risk assessments, security and incident response testing, and contingency planning and testing.
- Ensuring that for each information system, security is planned, documented, and integrated and implemented in accordance with Federal and GSA directives, policies, and guidance.
- Working with the ISSO and ISSM to develop, implement, and manage POA&Ms for assigned systems in accordance with CIO-IT Security-09-44.
- Working with the ISSO and ISSM to monitor and resolve risks identified for systems under their purview in the Cybersecurity Risk Register.

## 2.14 Data Owners

Responsibilities include the following:

- Coordinating with system owners, ISSMs, ISSOs, and Custodians to ensure the data is properly stored, maintained, and protected IAW GSA policies, regulations and any additional guidelines established by GSA.
- Ensuring that data is not processed on a system with security controls that are not commensurate with the sensitivity of the data.

## 2.15 Contracting Officers (COs) and Contracting Officer's Representative (CORs)

Responsibilities include the following:

- Coordinating with the CISO or other appropriate official as required ensuring that all agency contracts and procurements are compliant with the agency's information security policy and include appropriate security contracting language and security requirements in each contract.
- Ensuring new solicitations for all GSA IT systems includes the security contract language from CIO-IT Security-09-48, "*Security and Privacy Requirements for IT Acquisition Effort.*"

## 2.16 Custodians

Responsibilities include the following:

- Coordinating with data owners and system owners to ensure data is properly stored, maintained, and protected.
- Establishing, monitoring, and operating information systems in a manner consistent with GSA policies and standards as relayed by the AO.

## 2.17 Authorized Users of IT Resources

Responsibilities include the following:

- Complying with all GSA security policies and procedures.
- Reporting any observed or suspected security problems/incidents to the IT Service Desk.

## 3 GSA OCISO Divisions

The OCISO consists of the CISO and four divisions providing operational, engineering, policy, and security officer support as detailed in the following subsections.

### 3.1 Security Operations Division

The Security Operations Division (ISO) provides real-time operational security through Security Operating Center (SOC) and enterprise network security capabilities. This division supports IT division offices by providing vulnerability scanning and operational security services at the enterprise level including managing firewalls, intrusion prevention systems, and the Enterprise Logging Platform (ELP).



### 3.2 Security Engineering Division

The Security Engineering Division (ISE) provides security consulting and engineering support for systems and emerging IT and IT security initiatives. In addition, this division provides incident response and technical benchmarks. ISE directly supports IT division offices in developing technical security standards and architectural security standards in the support of IT systems.

### 3.3 Policy and Compliance Division

The Policy and Compliance Division (ISP) provides management and maintenance of the GSA Plan of Action & Milestones (POA&M), Ongoing Authorization, and Security Awareness and Role Based Training programs. This division also manages the process to create and maintain GSA IT security policies, the coordination of cybersecurity audits, and the FISMA compliance reporting process. ISP provides information to the CISO and AOs to monitor the implementation of the GSA IT Security policy.

### 3.4 ISSO Support Division

The ISSO Support Division (IST) provides ISSO and ISSM support services to all Staff Offices and Services systems. The division facilitates integrating IT security in programs and compliance with required security and privacy requirements. IST services assist the CISO and AOs during the assessment process to grant an Authorization to Operate.

## 4 Risk Management Process

### 4.1 Framing Risk

GSA's Information Security risk frame describes the environment in which risk-based decisions are made. It includes the set of assumptions, constraints, risk tolerances, and priorities/trade-offs that shape our approach for managing risk and making investment and operational decisions.

### 4.2 Risk Assumptions

Enterprise-level assumptions associated with the risk management strategy include:

- GSA's centralized risk management and effective governance processes allow the use of a single methodology across all mission areas.
- Key risk management personnel have appropriate training and understand and execute their roles.
- The ERM strategy provides requirements for risk assessment, response, and monitoring including cybersecurity risk.
- The five elements of NIST's Cybersecurity Framework (CSF) – Identify, Protect, Detect, Respond and Recover – have been considered as part of our risk management process



- GSA has identified High Value Assets (HVAs) supporting Primary Mission Essential Functions and Mission Essential Functions and uses this information to guide the prioritization of risk resolution.
- FIPS 199 High or Moderate systems typically have a lower risk tolerance than FIPS 199 Low systems with publicly available data. Systems with personally identifiable information (PII) or other sensitive data have a lower risk tolerance than systems without such data.
- The NIST RMF is used to manage information security and privacy risk.
- Systems placed into production will have undergone an authorization process based upon the RMF. Any findings from the assessment and authorization (A&A) process will be assessed for risk and managed via Plans of Action and Milestones (POA&Ms).
- Vulnerabilities are identified through GSA's weekly vulnerability scanning processes, Vulnerability Disclosure Program, Department of Homeland Security (DHS) Cyber Hygiene reports, and other security tools.
- Potential threats are identified and documented including impact and likelihood that harm will occur.
- Appropriate processes have been developed to detect and respond to a cybersecurity incident.
- GSA utilizes lessons learned from incident response to improve response and recovery processes and reduce risk in the future.

### 4.3 Threat Sources

The OCISO ISO division identifies the threat landscape for GSA and assists with correlating the threat scenarios or viable threats with existing vulnerabilities that these threats can take advantage of in the GSA environment. ISO also manages GSA's Threat Awareness Program, as described in CIO-IT Security-01-02, "*Incident Response (IR)*." ISO reviews indicators of compromise (e.g., domains/ IP addresses of known malicious actors, hashes of malicious files, traffic excerpts of suspicious activity, etc.) from threat intelligence for actionable information and shares this information with relevant system owners, DHS' Cybersecurity & Infrastructure Security Agency (CISA), and other government agencies as needed. DHS CISA provides guidance through the Federal Cybersecurity Coordination, Assessment, and Response (C-CAR) protocols to coordinate and communicate threat intelligence information with GSA and other Federal agencies. DHS CISA also issues Cybersecurity Directives – binding operational and emergency directives – identifying threats that require immediate actions. ISO implements proactive blocking of IP addresses, Uniform Resource Locators (URLs), hashes, fraudulent email senders, as necessary. Appendix C of CIO-IT Security-01-02 identifies tools and sources GSA OCISO uses for threat information. They include external entities such as DHS CISA, FireEye Partners, and GSA enterprise network and security monitoring tools.

On a system-by-system basis, individual threat sources/events (e.g., agents, vectors) are identified in accordance with the threat taxonomy in NIST SP 800-30. Additional threat information may be provided from sources such as CDM tools (attack vectors) and other automated tools.

## 4.4 Characterization of Vulnerabilities and Sources

Information system and information security vulnerabilities and predisposing conditions may be identified by the processes described below.

**A&A process followed by a GSA system to achieve its initial ATO.** Every system at GSA undergoes an A&A process leading to an ATO. Each A&A process described in CIO-IT Security-06-30 requires an assessment to be performed. The assessment may reveal vulnerabilities based on any of the following activities. Any findings resulting from these activities must be assessed for risk.

- Completion of GSA's NIST SP 800-53 test cases associated with the NIST controls required by the system's FIPS 199 categorization and A&A process. This task includes the assessment of information security architectures and integration of security into the development process.
- Vulnerability and configuration scans performed as part of the A&A process as documented in CIO-IT Security-06-30.
- Penetration tests completed as part of the system's A&A process requirements as documented in CIO-IT Security-06-30 and CIO-IT Security-11-51, *"Conducting Penetration Test Exercises."*

**Vulnerability management process described in CIO-IT Security-17-80.** Systems are scanned by various vulnerability scanning tools on a periodic basis as identified in the [06-30 Scanning Parameter Spreadsheet](#). Various reports (e.g., Top 10 vulnerabilities, Top 10 Hosts with vulnerability remediation time frames exceeded, etc.) are distributed by the ISO division. Verified findings from the scans, as identified in CIO-IT Security-17-80 must be assessed for risk.

**Continuous monitoring process described in CIO-IT Security-12-66, *"Information Security Continuous Monitoring (ISCM) Strategy & Ongoing Authorization (OA) Program."*** Systems in GSA's Ongoing Authorization (OA) Program must adhere to the technical and non-technical assessment of the security controls identified in CIO-IT Security-12-66. Any findings from the automated or manual assessments must be assessed for risk.

**Vulnerability Disclosure Policy (VDP).** GSA's VDP is publicly available at the [VDP web page](#). This policy establishes a program for security researchers to identify and report vulnerabilities to GSA so they can be remediated.

**GSA's CDM implementation in accordance with DHS/OMB guidance.** GSA has implemented CDM tools per DHS/OMB guidance. As the results of the CDM tools are verified and integrated into GSA's vulnerability and ISCM processes, any findings will need to be assessed for risk.

**FISMA processes (i.e., annual self-assessments, FISMA metrics analysis) described in CIO-IT Security-04-26, *"Federal Information Security Modernization Act (FISMA) Implementation."*** FISMA of 2014 requires annual self-assessments, and DHS/OMB requires agencies to submit quarterly FISMA metrics regarding various aspects of security that are compiled into agency-

specific and government-wide risk management assessment (RMA) scorecards. The scorecards are provided to Agencies every quarter. The RMA scorecards are grouped by the FISMA metrics and CSF domains with associated risk ratings (e.g., Managing Risk, At Risk, High Risk, or Not Applicable) for the individual groups and summarized at the group and overall agency level. This data is used to guide the remediation of risks based on OMB/DHS guidance/requirements.

**Audits (e.g., IG, FISMA) performed on GSA's system and security processes.** Audits (internal and external) are performed regularly on GSA systems and security processes. Any audit findings must be assessed for risk.

**Incidents/Events identified by internal or external activities.** Incidents may be reported by external or internal entities or events may be discovered through network/system monitoring, user reports, or threat intelligence sources. The incident response, monitoring, or threat intelligence actions may identify findings/conditions that need to be assessed for risk. For example, GSA participates in DHS's Cybersecurity Coordination Assessment, and Response (C-CAR) process and complies with DHS Cybersecurity Directives (i.e., Emergency Directives [EDs], Binding Operational Directives [BODs]). Both C-CAR and EDs/BODs identify events or vulnerabilities and mandate GSA responses to them.

## 4.5 Consequences and Impact

At the system level GSA initially applies the FIPS 199 security categorization to assess the consequences and impacts of risks (i.e., threats exploiting vulnerabilities) to the systems and their data. GSA has also implemented tailored A&A processes and control baselines for systems that meet additional criteria. For example, systems may qualify for the Lightweight Security Authorization Process, the Low Impact or Moderate Impact Software-as-a-Service Security Authorization processes based on their level of data or environment; each of these processes have streamlined procedures and controls because the consequences or impact to GSA, individuals, other organizations, and the Nation is reduced.

GSA has specified several NIST SP 800-53 controls as required in addition to the FIPS 199 baselines due to a consideration of GSA's environment, mission, and functions. GSA selected these controls because the consequences and impact of the controls not being implemented correctly, along with a set of Showstopper controls, are too great to allow systems to not implement them. CIO-IT Security-06-30 identifies these additional controls which must be implemented to receive an ATO. For example, all systems that are designated as High Value Assets, are FIPS-199 High, or are Internet facing must have a penetration test conducted prior to ATO and annually thereafter.

GSA also mandates controls related to encryption when systems have specific types of information (i.e., Personally Identifiable Information (PII), Payment Card Industry (PCI), authenticators, systems specific business sensitive information) due to the consequences and impact of such data being exposed or the systems breached.

Impact is influenced by factors such as resiliency, spread or containment of an event, the assets susceptible to an event, and weighting factors such as if an asset is a High Value Asset (HVA) listed in GSA's HVA inventory.

#### 4.6 Likelihood

Likelihood is determined manually using data provided by automated tools and system/organizational conditions. As described in NIST SP 800-30, likelihood of an adverse impact is determined by considering:

- How likely is it that threat sources (adversarial or non-adversarial) could cause an event to occur?
- How likely is it, if initiated, that an event would result in an impact?

GSA's robust security stack, including network and endpoint-based solutions, provide information that can inform the answers to the questions above. For example, these tools as well as GSA's threat intelligence may indicate if there are known exploits of vulnerabilities, if the known exploits are readily available, and if there has been evidence of the exploits being used elsewhere or targeted at GSA. Additional tools (e.g., a Governance, Risk, and Compliance [GRC] tool) or additional capabilities in existing tools may provide additional automation of likelihood determination in the future.

#### 4.7 Risk Constraints

The following risk constraints, to some extent, limit GSA's ability to reduce risk:

- Risk remediation is reliant on available resources (e.g., funding, tools/capabilities, personnel) and the effectiveness of those resources in mitigating risk<sup>2</sup>.
- Implementation timelines may be impacted by available funding; the complexity of the mitigation; contractual relationships; use of legacy hardware and software; organizational governance structure; geographical location of facilities; legal and regulatory requirements, workforce; organizational culture; and trust relationships.
- Maintaining an accurate inventory of physical and virtual hardware, software, and connections has become difficult with the increased number of mobile devices, the Internet of Things (IOT), and adoption of cloud-based applications and devices.
- The evolving complexity of digital assets has made risk assessment difficult.

#### 4.8 Risk Tolerance

GSA's risk tolerance strategy is based on:

- System categorizations according to FIPS 199 levels;

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<sup>2</sup> NISTIR 8286 discusses the use of a risk reserve to avoid or mitigate an identified risk. Risk owners should discuss with acquisition or procurement teams and budget owners setting aside funding or labor hours as part of a risk reserve during project planning.

- System A&A process followed;
- CISO mandated Showstopper capabilities/associated controls as defined in CIO-IT Security-06-30;
- DHS Cybersecurity directives;
- Type of data (PII, other sensitive data, publicly available data);
- Accessibility of the system (Internet facing or internal access only).

Systems categorized as FIPS 199 High or Moderate typically have a lower risk tolerance than systems categorized as FIPS 199 Low systems with publicly available data. Similarly, systems with PII or other sensitive data have a lower risk tolerance than systems without such data. Systems accessible from the Internet also have a lower risk tolerance, especially if they can be used as an avenue to internal systems. The GSA A&A process a system follows to receive an ATO is, in part, determined by the risks of the system and its data being exploited, which in turn impacts the determination of risk tolerance for the system. For example, a system following the CIO-IT Security-14-68, *“Lightweight Security Authorization Process,”* will have a higher risk tolerance due to the restrictions on the types of systems that can use that process compared to a system following the standard A&A process. CISO Showstopper capabilities/controls that are not fully satisfied may lead to a system not being authorized due to the risk involved and, at a minimum, must have an Acceptance of Risk letter approved with a plan on how the risk can be mitigated or resolved. GSA’s risk tolerance is summarized by the following statements.

- Risk mitigation will be the appropriate risk response for all Very High/Critical and High risk vulnerabilities that can be exploited from the Internet which cannot be accepted, avoided, shared, or transferred.
- Risks from vulnerability scans must be addressed in the following manner:
  - For Internet-accessible IP addresses
    1. Any Critical (Very High) scan vulnerabilities must be remediated within 15 days.
    2. Any High scan vulnerabilities must be remediated within 30 days.
    3. Any Moderate scan vulnerabilities must be remediated within 90 days.
  - For all other assets
    1. Any Critical (Very High) and High scan vulnerabilities must be remediated within 30 days.
    2. Any Moderate scan vulnerabilities must be remediated within 90 days.
  - Low/Very Low risk vulnerabilities will be addressed on a case-by-case basis as specified in CIO-IT Security-06-30.

## 4.9 Priorities and Trade-offs

Prioritization of risk response enables a business-driven approach that maximizes the value of GSAs investments. The prioritization of mission functions is established at Level 1 by Executive leadership and communicated to Levels 2 and 3.

GSA ranks threat events by the level of risk determined during the risk assessment – with the greatest attention going to high risk events impacting:

- Primary Mission Essential Functions (PMEFs): Those mission essential functions that must be performed to support the National Essential Functions before, during, and in the aftermath of an emergency.
- Mission Essential Functions (MEFs): The limited set of agency-level government functions that must be continued throughout or resumed rapidly after a disruption of normal activities, and
- High Value Assets supporting PMEFs and MEFs

Priority and funding are provided for the implementation of enterprise capability gaps in the Identify, Protect, Detect, Respond and Recover security domains since these capabilities help in preventing emerging threats for all systems supported by the enterprise capabilities. Priorities are adjusted based on changing environment needs. For example, the risks associated with a remote workforce drives the priority for implementation of a zero-trust architecture and model.

GSA has a legal responsibility to protect sensitive information residing on information systems. This includes but is not limited to PII and financial data.

GSA must sometimes make risk trade-offs. At Level 1, it may be better to aggregate multiple risks in one broad-based response rather than individually addressing each risk. Choosing not to remediate risks on a legacy system scheduled for replacement by instead accelerating completion of the replacement is another example of a trade-off. Risk trade-off decisions will be made by the SAORM in consultation with the Risk Executive Function.

## 5 Assessing Risk

GSA's information and information system security risk strategy is based on assessing and managing risks as part of the following processes:

- The A&A process followed by a GSA (federal or contractor) system to achieve its initial ATO as defined in CIO-IT Security-06-30.
- The vulnerability management process described in CIO-IT Security-17-80.
- The information system continuous monitoring and ongoing authorization processes described in CIO-IT Security-12-66.
- GSA's Continuous Diagnostics and Mitigation (CDM) implementation in accordance with DHS/OMB guidance.
- The DHS HVA assessments of HVA systems.
- The FISMA processes (i.e., annual self-assessments, FISMA metrics analysis) described in CIO-IT Security-04-26.
- Any penetration tests required as defined in CIO-IT Security-06-30, and CIO-IT Security 11-51.
- Audits (e.g., Inspector General [IG], FISMA) performed on GSA's system and security processes.
- Incidents/Events identified by internal or external activities as described in CIO-IT Security-01-02.

- The POA&M process as defined in CIO-IT Security-09-44.

## 5.1 Risk Assessments Within GSA

GSA follows the NIST SP 800-30 risk assessment process when assessing information system and information security risks when performing A&As and essentially follows the same steps for any of the assessments identified earlier. That process consists of the following steps and tasks:

- Prepare for Assessment
- Conduct Assessment
  - Identify Threat Sources and Events
  - Identify Vulnerabilities and Predisposing Conditions
  - Determine Likelihood of Occurrence
  - Determine Magnitude of Impact
  - Determine Risk
- Communicate Results
- Maintain Assessment

Preparing for an assessment will be unique to the various processes listed earlier (e.g., penetration tests, A&A process, audits) and are covered in the GSA IT Security Procedural Guides for those processes and, in general, in CIO-IT Security-06-30 regarding security assessment planning. For these reasons, preparing for the assessment will not be covered in this document.

In addition to the process from NIST SP 800-30, GSA uses the following processes, as appropriate, for assessing risk.

- Cyber Hygiene/Compliance Assessments (to support implementation of the RMF)
- Software dependency analysis;
- Conventional resilience analysis (e.g., mission resilience or system resilience);
- Assessment of cyber resiliency against advanced cyber adversaries (e.g., the .gov Cybersecurity Architecture Review (govCAR); NSA/CSS Technical Cyber Threat Framework, v2<sup>3</sup> and MITRE ATT&CK™ for Enterprise IT<sup>4</sup>).

Regardless of the risk assessment process followed, it feeds into GSA's overall ERM process and supports decision making regarding:

- Development of an information security architecture;
- Definition of interconnection requirements;
- Design, implementation, operation, and maintenance of security solutions;
- Selection of Supply Chain Risk Management (SCRM) controls;
- Authorization or denial of authorization to operate information systems,

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<sup>3</sup> [U.S. National Security Agency, Cybersecurity Report, NSA/CSS Technical Cyber Threat Framework v2, November 2018,](#)

<sup>4</sup> [MITRE ATT&CK® for Enterprise.](#)



- Modification of missions/business functions and or processes, and
- Funding of information security programs.

## 5.2 Assessing Risk of External Providers

Many of the assets on which GSA depends are not within its direct control. GSA and its external providers share responsibility for supporting organizational missions and business functions.

FISMA and OMB policies require that federal agencies using external service providers assure that the providers meet the same security requirements that federal agencies are required to meet. GSA utilizes the Federal Risk and Authorization Management Program (FedRAMP) approved cloud solutions/service providers and issues Agency FedRAMP ATOs, when appropriate.

As documented in CIO-IT Security-09-48, GSA incorporates the requirement for systems to follow GSA's security processes into the terms and conditions of its acquisition contracts. These terms include following the NIST SP 800-37 RMF and implementing NIST SP 800-53 controls for all systems acquired from vendors. GSA requires its external providers to provide appropriate evidence to demonstrate that they have complied with the RMF in protecting federal information. This includes independent assessments conducted by third parties and continuous monitoring. GSA maintains the responsibility for granting external service providers an authority to operate.

CIO-IT Security-19-101, *"External Information System Monitoring,"* requires all external systems to provide evidence that they are following GSA's continuous monitoring processes. The requirements include vulnerability scanning and remediation, configuration management, and periodic deliverables to ensure GSA is able to effectively monitor the security status of external systems. The monitoring of external systems is reinforced by using GSA's Archer Governance, Risk and Compliance (GRC) solution to generate checklists that require ISSOs and ISSMs to indicate if the required monitoring is taking place and any resolution if requirements are lapsing.

## 5.3 Risk Determination

Risk is determined by both automated and manual methods. Per NIST SP 800-30, risk consists of combining the likelihood of a threat event occurring with the level of impact it would cause. Similar to likelihood, GSA automated tools used as part of its vulnerability management process, CDM implementation, and penetration testing generally provide a risk or vulnerability score based on the results of findings. The DHS risk scoring methodology, Agency-Wide Adaptive Risk Enumeration (AWARE), is used within the CDM tool implementation to provide automation assistance for prioritizing the mitigation of vulnerabilities and risks identified by CDM tools. Manual assessments (e.g., test cases, manual part of penetration tests) will have risk determined manually. A more detailed description of how information system risks are assessed is provided in CIO-IT Security-06-30.



**Note:** A tool's risk rating is not necessarily the final risk rating for a vulnerability and its possible exploitation. Other factors, such as the environment where the vulnerability exists, automated or manual safeguards that provide additional protection, etc. may cause assessors to raise or lower the risk of a threat event causing an adverse impact.

DHS/OMB compiles FISMA Risk Management Assessment (RMA) scorecards as part of annual FISMA analysis and reporting. The RMA scorecards are grouped by the FISMA metrics and Cybersecurity Framework domains with associated risk ratings (e.g., Managing Risk, At Risk, High Risk, or Not Applicable) for the individual groups and summarized at the group and overall GSA level. GSA considers the RMA scorecard and its underlying data as part of its risk remediation and mitigation process.

GSA also uses input from the annual FISMA IG audit, financial audits, and other third-party audits as part of determining risk and its remediation and mitigation. Every audit finding generates a POA&M that is monitored until resolution.

## 6 Responding to Risk

GSA considers the following types of possible responses to risk when identifying, evaluating, and deciding on courses of action: risk acceptance, risk avoidance, risk mitigation, and risk sharing. Details regarding these courses of action are discussed in [Section 6.3](#).

At each level in [Figure 1](#) responses to risk are managed using different tools and processes. At the system level risks are managed by responding to identified vulnerabilities and risks and, when necessary, entering them into a system level POA&M that is used to monitor and track the risk. At the business process/program level risks are managed by a Program level POA&M and the activities identified in CIO-IT Security-08-39 and the quarterly AO Sync meetings established therein. The AO Sync Meetings are where senior managers within GSA's organizations see how their systems are performing in responding to risk and decisions can be made concerning prioritizing specific risk responses. At the Agency level the ERSI Board and the EMB establish responses to enterprise risks and monitor and track them as part of their charters. The EMB uses a risk profile for monitoring risks. The ERSI has established a Cybersecurity Risk Register (see [Appendix D](#)) to track and monitor cyber risk responses.

### 6.1 Risk Response Identification

As described in earlier sections, risks are identified and assessed using various tools, processes, and from input from sources such as audits and third-party assessments. The responses to risks at levels 2 and 3 are governed by processes described earlier such as requirements specified in CIO-IT Security-06-30 regarding vulnerability remediation timeframes and acceptance of risk, the activities documented in CIO-IT Security-08-39 that address requirements from various other Federal and GSA guidance documents such as Executive Orders, Eds/BODs, and GSA's vulnerability management process. The responses at Level 1 are governed by the GSA ERSI Board and EMB.

## 6.2 Evaluation of Alternatives

At each Level, alternative courses of action will be identified for all risks above the risk tolerance, sequentially starting with the highest risks. Alternative courses of action may include implementing compensating controls, updating operational procedures, implementing technical changes using existing capabilities, developing or acquiring new solutions, designing architectural changes, changes in organizational culture or programs.

GSA's evaluation of alternative courses of action includes considering (i) the expected effectiveness in achieving the desired risk response (and how effectiveness is measured and monitored); and (ii) the anticipated feasibility of implementation, including, for example, mission/business impact, political, legal, social, financial, technical, and economic considerations.

GSA, as a provider of many shared services for other Government agencies, cannot assume the risk for other agencies using GSA's systems. Those agencies using GSA's systems must make their own risk-based decision, following their processes, before using the systems.

## 6.3 Risk Response Decision

Risk-informed decisions (e.g., risk response) enhance mission accomplishment by reducing the loss or degradation of confidentiality, integrity, or availability. At each level, risk response decisions are made at the appropriate level. At the system level, AOs and the CISO are cognizant of risk responses based on system Security Assessment Reports (SARs), POA&Ms, and AoRs. At the business process/program level the CISO and AOs, and others they designate, are involved in establishing risk responses that address multiple systems, up to and including the enterprise. At the enterprise level the CISO and ERSI and EMB board members make decisions that affect the enterprise and impact the other levels.

The following sections discuss the various decisions that may be made to address risks.

### 6.3.1 Risk Acceptance

Risk acceptance will be used when the appropriate risk is deemed to be Moderate or Low/Very Low depending on particular situations or conditions. The AO may accept the risk for GSA systems that have undergone the ATO process and are granted an ATO with conditions until all of their respective system's findings are remediated in the prescribed time as determined in the conditions of their authority to operate the system.

Risk acceptance may also be an acceptable response for Very High/Critical and High vulnerabilities that cannot be exploited from the Internet on a mission critical system that cannot be patched. Risk acceptance may also be requested from GSA AOs for systems meeting one of the following conditions:

- Have budgetary constraints that limit remediation efforts;
- Legacy systems that cannot be patched;

- Systems that are scheduled for disposal.

CIO-IT Security-06-30 establishes Acceptance of Risk (AoR) letters as the means to document accepted risks higher than Very Low/Low risks. An AO may approve Moderate risks via an AoR letter; AoR letters for Very High/Critical and High risks must be approved by the AO and concurred by the CISO. Very Low/Low risks will be addressed on a case-by-case basis.

### 6.3.2 Risk Avoidance

Risk avoidance will be used when the appropriate risk is deemed to exceed the organizational risk tolerance. If risk avoidance is used for any particular risk, specific actions must take place to eliminate the activities or technologies that are the basis for the risk.

GSA will use risk avoidance for all technologies that have Very High/Critical or High vulnerabilities that can be exploited from the Internet but cannot be mitigated. For example, end-of-life (EOL) software can be avoided if, when the system is being designed, the architecture and software inventory is reviewed for existing or soon-to-be EOL software.

### 6.3.3 Risk Mitigation

Risk mitigation will be the appropriate risk response for all Very High/Critical and High risk vulnerabilities that can be exploited from the Internet and cannot be accepted, avoided, shared, or transferred. Risk mitigation measures will be employed based on prioritization. In general, the prioritization aligns with the level of risk (i.e., Very High/Critical risks should be addressed prior to High risks); however, when there are multiple risks at the same level, system and security personnel coordinate to establish which risks will be addressed first. Prioritization is typically a manual process including criteria such as the probability of vulnerability exploitation, material business impact if vulnerability is successfully exploited, compliance requirements, evaluation of attack vectors and exposures, level of assets (i.e., High Value and Critical assets prioritized above others), and the cost and business impact of remediation activities and controls. The DHS AWARE process will assist in automating prioritization for risks identified as part of the CDM program.

The mitigation of risks that affect GSA systems that are identified in DHS EDs, BODs, or from the C-CAR protocols are prioritized based on the risk levels and timelines specified by DHS.

### 6.3.4 Risk Sharing or Transfer

GSA will use risk sharing or risk transfer when GSA is responsible for one piece of the hardware or software stack and another agency or vendor is responsible for another piece of the hardware or software stack. Contractor Owned/Contractor Operated (COCO) and cloud-based systems meet these criteria.

Other areas where risk is shared include when a system is a subsystem of another system, when controls are inherited as common or hybrid controls from the enterprise or other systems and when any as-a-service offering is used. In all cases the two systems share risk based on their reliance on each other for implementing part or all of a control.

When GSA systems interconnect with another organization's or vendor's systems the risks are shared and described in the associated Interconnection Security Agreement (ISA).

## 6.4 Sharing Risk-Related Information

At the enterprise level GSA uses the EMB, serving as the Risk Executive (Function) to share risk-related information with key personnel within GSA. GSA uses a Cybersecurity Risk Register (see [Appendix D](#)) to aggregate and manage the organization's highest cybersecurity risks in a consistent, structured manner. Inputs to the Cybersecurity Risk Register include A&A assessments/POA&Ms, audit findings, and findings from Eds/BODs, and other third-party assessments.

The EMB (where the CIO is a member), in consultation with the ERSI Board (where the CISO is a member) will determine what risk information can be shared externally. The CDM and FISMA reporting processes require certain risk related information be shared with CISA and OMB. Any risks arising from the CDM and FISMA reporting processes are communicated with GSA Administrator and Deputy Administrator by the CIO & CISO.

## 7 Monitoring Risk

Ongoing monitoring is a critical part of the risk management process, GSA uses risk monitoring to:

- Verify compliance with information security requirements;
- Determine the ongoing effectiveness of risk response measures; and
- Identify changes to information systems and environments of operation that may impact the risk posture.

### 7.1 Monitoring Compliance

Compliance monitoring ensures that cybersecurity controls at Levels 1, 2 and 3 have been implemented correctly and are operating as intended. Compliance monitoring also verifies that the information security requirements are derived from and traceable to GSA's missions, business functions, federal legislation, directives, regulations, policies and standards, and guidelines.

GSA conducts compliance monitoring to verify continued control implementation after the initial assessment of the system per the RMF. GSA's compliance monitoring relies on automation as much as possible and includes:

- Vulnerability management processes described in CIO-IT Security-17-80.
- Continuous monitoring processes described in CIO-IT Security-12-66.
- GSA's CDM implementation in accordance with DHS/OMB guidance. Dashboards are used to monitor vulnerabilities and configuration setting compliance.

- FISMA processes (i.e., annual self-assessments, FISMA metrics analysis) described in CIO-IT Security-04-26.
- Audits (e.g., IG, FISMA, third-party) performed on GSA's system and security processes.
- Incidents/Events identified by internal or external activities described in CIO-IT Security-01-02.
- AO Sync meetings as described in CIO-IT Security-08-39.

The use of these tools and processes is facilitating GSA's migration from compliance-driven risk management to data-driven risk management. This move will provide GSA with the information necessary to support risk response decisions, security status information, and ongoing insight into security control effectiveness.

## 7.2 Monitoring Effectiveness

Monitoring the effectiveness of GSA's risk management strategy is gauged by evaluating how effective implemented risk response measures, including the implementation of any remediation or compensating controls, have been in reducing identified risks to the desired level. GSA monitors the effectiveness of its risk management framework initially before a system goes into production via the A&A ATO process and through analyzing the results of the processes in the following guides.

- CIO-IT Security-04-26, "*FISMA Implementation Guide*" – self assessments and FISMA metric reports.
- CIO-IT Security-06-30, "*Managing Cybersecurity Enterprise Risk*" – initial ATOs and specific controls such as vulnerability scanning, configuration management, continuous monitoring, and periodic updates of A&A documents.
- CIO-IT Security-08-39, "*FY21 Management Implementation Plan*" – identifies recurring activities systems must perform (e.g., resolve vulnerabilities, manage POA&M resolution, maintain A&A documents, including the AO Sync meetings where the CISO and AOs monitor compliance with the required activities).
- CIO-IT Security-09-44, "*Plan of Action and Milestones (POA&M)*" – monitoring the progress in resolving POA&Ms, including POA&Ms associated with AoRs and ATO contingencies.
- CIO-IT Security-12-66, "*Information Security Continuous Monitoring (ISCM) Strategy & Ongoing Authorization (OA) Program*" – using CDM and other enterprise security tools to monitor systems.
- CIO-IT Security-17-80, "*Vulnerability Management Process*" – vulnerability scanning and configuration setting checks.
- CIO-IT Security-19-95, "*Security Engineering Architectural Reviews*"
- CIO-IT Security-19-101, "*External Information System Monitoring*"

These processes provide key insight into how GSA's risk management strategy is performing. Effectiveness monitoring will also be performed by defining key performance metrics/indicators, defining acceptable thresholds for the indicators, and measuring progress towards achieving the performance metrics.

Based on the analysis of the effectiveness of these risk management processes, metrics, and measures, GSA will modify them in order to reduce risks and improve information system and information security. Modifications may include, but is not limited to, the following types of actions:

- Increasing automation (e.g., Security Orchestration tools) in identifying vulnerabilities and risks, including improving and expanding the use of dashboards;
- Modifying measures/metrics to increase expected levels of protection of systems and their data;
- Improving incident response and vulnerability detection capabilities by assessing new tools, technologies, and techniques and integrating them where appropriate;
- Modifying GSA's VDP to improve the identification and remediation of vulnerabilities;
- Focusing remediation/mitigation responses to address the highest risk/highest impact items first;
- Using lessons learned during response and recovery activities/tests to improve processes and techniques.

### 7.3 Monitoring Changes

Change monitoring is a component of the change management process, which manages updates to production systems. Changes to systems are overseen through GSA's change and configuration management processes. However, those changes which affect prior risk decisions like changes in the value of information, threat environment, or technology, an end-of-life product, can affect the security state of the system and are carefully monitored by GSA.

## 8 Communicating Results

The results of risk assessments and overall risk management are communicated using multiple methods. The primary means used are:

**Security Assessment Reports (SAR).** SARs are prepared as part of a system's A&A process and include all risks determined as part of the assessment. Certain A&A processes (defined in CIO-IT Security-06-30) will not have a formal SAR, but they will still assess risk as part of an assessment of the system.

**Penetration Test Reports (when required).** Systems with a SAR will include the results of penetration tests in the overall SAR for a system. For systems without a formal SAR a separate penetration test report will be prepared.

**Dashboards.** GSA's automated tools (CDM and vulnerability scanning) include dashboards or similar features where authorized personnel can review risk results from the automated tool assessments, including the ISCM dashboard in GSA's Elasticsearch, Logstash, Kibana (ELK) stack.

**Plan of Action and Milestones (POA&M).** POA&Ms are required for every system at GSA. Subsystems, as defined in CIO-IT Security-06-30, typically have their POA&Ms included in the FISMA system they reside on. In special situations, after coordination with the OCISO, they may have their own POA&M. GSA's POA&M process is described in CIO-IT Security-09-

44 and includes reports on the effectiveness of POA&Ms in managing and mitigating risks. Reports are provided to personnel responsible for the security of individual systems, with summary reports provided to GSA ISSMs, IS Directors, and the CISO.

**AO Sync Meetings.** A feedback mechanism to inform AOs how well the systems under their purview are performing regarding risks. The quarterly briefings provide a practical tool with which AOs can gauge the effectiveness of their information security arrangements and assess how well their systems are performing. Specific security measures included in the briefing are: (1) AoRs, (2) ATO Conditions, (3) Showstopper Control status, (4) ATO Status, (5) Audit Findings, (6) POA&Ms.

## 8.1 Sharing Risk-Related Information

Sharing of risk-related information within GSA (but outside of IS) is at the determination of the CISO in collaboration with AOs, ISSMs, IS Directors, and subject matter experts within the OCISO. Part of the collaboration described is to determine which risks are appropriate to become a part of the overall GSA EMB process and entered into the GSA Cybersecurity Risk Register and the EMB's Risk Profile.

The CISO, in consultation with the IS Directors and GSA Executive Management, make the determination on what risk information should be shared externally. The separate CDM and FISMA reporting processes require certain risk related information be shared with DHS and OMB by law and Federal regulation. Any risks arising from the CDM and FISMA reporting processes (e.g., FISMA IG audits, RMA reports) are communicated with the GSA Administrator and Deputy Administrator by the GSA CIO and CISO.

## 9 Monitoring Risk Factors

Risk factors, such as threat sources, vulnerabilities, etc., are monitored by the assessment processes described earlier. The ISO Division updates threat information as part of the Threat Awareness Program described in CIO-IT Security 01-02. Vulnerabilities are monitored via GSA's assessment and continuous monitoring processes, some of those processes occur as often as weekly, others annually, and others as an A&A or security assessment process requires.

### 9.1 Updating Risk Assessments

Similar to monitoring of risk factors, updating of risk assessments occurs dependent upon the A&A process being followed. POA&Ms are expected to be maintained regularly as new vulnerabilities/risks are identified, and as actions within the POA&M are performed. POA&Ms are required to be updated at least quarterly. Automated tools (CDM, vulnerability scanners) will update as the tools execute and will identify new vulnerabilities/risks and whether or not previous vulnerabilities/risks have been resolved. The vulnerabilities the automated tools check for are updated on a regular basis by the tool vendors, details are in CIO-IT Security-17-80.



## 9.2 Response to Change

GSA monitors changes to its information systems and their architectures by periodically assessing risks at the mission/business process levels in which those systems operate.

- **Information System:** Changes that occur in GSA information systems (including hardware, software, and firmware) that can introduce new risk or change existing risk. GSA has established a rigorous configuration change management process. Any IT changes are requested through a defined CM approval process (e.g., a chartered Change Control Board [CCB]) using automated or manual processes to document the nature of changes, their criticality, impacts on the user community, testing and rollback procedures, stakeholders, and points of contact. System changes are tested and validated prior to implementation into the production environment. Configuration settings and configuration baselines are updated as necessary to meet new technical and/or security requirements and are controlled through the CM process. The CM process requires testing/validating changes where the scope of the change has a major impact on agency reputation, has a large scope or has the potential for significant monetary impact. Additional details on change management can be found in CIO-IT Security-01-05, "*Configuration Management (CM)*."
- **Environments of Operation:** Environmental and operational considerations include, but are not limited to, missions/business functions, threats, vulnerabilities, mission/business processes, facilities, policies, legislation, and technologies.

## 10 Aligning NIST Risk Assessments and the CSF

As described in the introduction, GSA adheres to NIST guidance as it relates to risk management. All of GSA's A&A processes have the NIST RMF as a foundation. Risk assessments are performed in accordance with NIST SP 800-30. GSA manages, tracks, and submits FISMA, metrics and performance measures which are aligned to the CSF core functions to inform risk management decisions and planning. As required by EO 13800, GSA has aligned its risk management process with the NIST CSF core functions as described below.

**Identify (ID):** Develop an organizational understanding to manage cybersecurity risk to systems, assets, data, and capabilities.

- GSA has identified its high value/critical assets which guides how GSA prioritizes risk resolution.
- Vulnerabilities are identified and documented, including threats, likelihoods, and impacts, via the multiple processes listed at the beginning of Section 5.
- The ISE Division receives threat intelligence from multiple sources and communicates this information to GSA's information security community.
- As part of this document and CIO-IT Security-06-30, risk prioritization and tolerance are identified.
- Systems categorized as FIPS 199 High or Moderate typically have a lower risk tolerance than systems categorized as FIPS 199 Low systems with publicly available data.



**Protect (PR):** Develop and implement appropriate safeguards to ensure delivery of critical infrastructure services.

- GSA's adherence to the NIST RMF process guides how systems are protected by security categorization, security control selection and implementation, and remediation of risks to protect systems.
- CIO-IT Security 17-80 and CIO-IT Security-12-64, "*Physical and Environmental Protection (PE)*," provide processes for managing vulnerabilities to address where additional protection is needed.

**Detect (DE):** Develop and implement appropriate activities to identify the occurrence of a cybersecurity incident.

- Vulnerabilities may be detected and documented, including threats, likelihoods, and impacts, via the multiple processes listed at the beginning of Section 5.
- Incidents and events may be detected by GSA's perimeter defenses such as firewalls, Intrusion Detection Systems/Intrusion Prevention Systems (IDS/IPS), or the Enterprise Logging Platform.
- Users may detect unusual or abnormal items or behavior in systems or applications (e.g., phishing emails) and report them to the IT Helpdesk.

**Respond (RS):** Develop and implement appropriate activities to take action regarding a detected cybersecurity incident.

- As incidents are responded to in accordance with CIO-IT Security-01-02, risks based on the incidents and vulnerabilities exploited will be shared as appropriate.
- As part of incident after action/lessons learned reports and semi-annual testing of the incident response plan, the plan, and processes within it are updated to improve future response actions.

**Recover (RC):** Develop and implement appropriate activities to maintain plans for resilience and to restore any capabilities or services that were impaired due to a cybersecurity incident.

- Although recovery is generally not a part of assessing risks, lessons learned during recovery from incidents provide feedback that can be used to improve response and recovery processes and reduce risks in the future.

For more information on GSA's alignment of the RMF to the CSF, refer CIO-IT Security-06-30.

## Appendix A: References

**Note:** GSA updates its IT security policies and procedural guides on independent cycles which may introduce conflicting guidance until revised documents are developed. In addition, many of the references listed are updated by external organizations which can lead to inconsistencies with GSA policies and guides. When conflicts or inconsistencies are noticed, please contact [ispcompliance@gsa.gov](mailto:ispcompliance@gsa.gov) for guidance.

The following references provide guidance, mandates, or direction on managing information systems and security risk within GSA.

### **Federal Laws, Standards and Guidance:**

- Department of Homeland Security (DHS) [Cybersecurity Directives](#)
- [EO 13800](#), “Presidential Executive Order on Strengthening the Cybersecurity of Federal Networks and Critical Infrastructure”
- Federal Financial Management Improvement Act of 1996 ([FFMIA](#))
- [FIPS PUB 199](#), “Standards for Security Categorization of Federal Information and Information Systems”
- [NIST Cybersecurity Framework, Version 1.1](#), “Framework for Improving Critical Infrastructure Cybersecurity” ([NIST web page on Cybersecurity Framework](#))
- [NIST SP 800-30, Revision 1](#), “Guide for Conducting Risk Assessments”
- [NIST SP 800-37, Revision 2](#), “Risk Management Framework for Information Systems and Organizations”
- [NIST SP 800-39](#), “Managing Information Security Risk”
- [NIST SP 800-53, Revision 5](#), “Security and Privacy Controls for Information Systems and Organizations”
- [NIST SP 800-137](#), “Information Security Continuous Monitoring (ISCM) for Federal Information Systems and Organizations”
- [NIST SP 800-137A](#), “Assessing Information Security Continuous Monitoring (ISCM) Programs: Developing an ISCM Program Assessment”
- [NISTIR 8286](#), “Integrating Cybersecurity and Enterprise Risk Management (ERM)”
- [NISTIR 8286A \(Draft\)](#), “Identifying and Estimating Cybersecurity Risk for Enterprise Risk Management (ERM)”
- [OMB Circular A-130](#), “Managing Information as a Strategic Resource”
- [OMB Memo 16-17](#), “OMB Circular No. A-123, Management's Responsibility for Enterprise Risk Management and Internal Control”
- [OMB Memo 16-24](#), “Role and Designation of Senior Agency Officials for Privacy”
- [OMB Memo 17-25](#), “Reporting Guidance for Executive Order on Strengthening the Cybersecurity of Federal Networks and Critical Infrastructure”
- [Public Law 113-283](#), “Federal Information Security Modernization Act of 2014”

### **GSA Directives, Policies, and Procedures:**

- [GSA Order CIO 2100.1](#), “GSA Information Technology (IT) Security Policy”

- The documents below are available on the GSA IT Security Procedural Guides [InSite Page](#).
- CIO-IT Security-01-02, *"Incident Response (IR)"*
- CIO-IT Security-01-05, *"Configuration Management (CM)"*
- CIO-IT Security-04-26, *"Federal Information Security Modernization Act (FISMA) Implementation"*
- CIO-IT Security-06-30, *"Managing Enterprise Cybersecurity Risk"*
- CIO-IT Security-09-44, *"Plan of Action and Milestones (POA&M)"*
- CIO-IT Security-09-48, *"Security and Privacy Requirements for IT Acquisition Effort"*
- CIO-IT Security-12-64, *"Physical and Environmental Protection (PE)"*
- CIO-IT Security-12-66, *"Information Security Continuous Monitoring (ISCM) Strategy & Ongoing Authorization (OA) Program"*
- CIO-IT Security-11-51, *"Conducting Penetration Test Exercises"*
- CIO-IT Security-17-80, *"Vulnerability Management Process"*
- CIO-IT Security-18-90, *"Information Security Program Plan (ISPP)"*

GSA IT Security forms are available on the [GSA IT Security Forms and Aids](#) InSite Page.

## Appendix B: Acronyms

<b>CDM</b>	Continuous Diagnostics and Mitigation
<b>CIO</b>	Chief Information Officer
<b>CSRM</b>	Cybersecurity Risk Management
<b>CSF</b>	Cybersecurity Framework
<b>ERM</b>	Enterprise Risk Management
<b>FISMA</b>	Federal Information Security Modernization Act
<b>IA</b>	Information Assurance
<b>ISSO</b>	Information System Security Officer
<b>IT</b>	Information Technology
<b>NIST</b>	National Institute of Standards and Technology
<b>OMB</b>	Office of Management and Budget
<b>RMF</b>	Risk Management Framework
<b>SDLC</b>	System Development Life Cycle
<b>SP</b>	Special Publication

## Appendix C: Glossary

<b>Availability</b>	Ensuring timely and reliable access to and use of information. NIST SP 800-37, Revision 2.
<b>Confidentiality</b>	Preserving authorized restrictions on information access and disclosure, including means for protecting personal privacy and proprietary information. NIST SP 800-37, Revision 2.
<b>Cybersecurity</b>	Prevention of damage to, protection of, and restoration of computers, electronic communications systems, electronic communications services, wire communication, and electronic communication, including information contained therein, to ensure its availability, integrity, authentication, confidentiality, and nonrepudiation. NIST 800-37, Revision 2.
<b>Cybersecurity Attack</b>	An attack, via cyberspace, targeting an enterprise's use of cyberspace for the purpose of disrupting, disabling, destroying, or maliciously controlling a computing environment/infrastructure; or destroying the integrity of the data or stealing controlled information. NIST 800-30, Revision 1.
<b>Cybersecurity Risk</b>	An effect of uncertainty on or within a digital context. Cybersecurity risks arise from the loss of confidentiality, integrity, or availability of information, data, or information (or control) systems and reflect the potential adverse impacts to organizational operations (i.e., mission, functions, image, or reputation) and assets, individuals, other organizations, and the Nation. NISTIR 8286.
<b>Enterprise</b>	An organization with a defined mission/goal and a defined boundary, using information systems to execute that mission, and with responsibility for managing its own risks and performance. An enterprise may consist of all or some of the following business aspects: acquisition, program management, financial management (e.g., budgets), human resources, security and information systems, information and mission management. NISTIR 8170 <sup>5</sup> .
<b>Environment of Operation</b>	The physical surroundings in which an information system processes, stores, and transmits information. NIST SP 800-37, Revision 2.

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<sup>5</sup> NISTIR 8286.

<b>Governance</b>	The set of responsibilities and practices exercised by the Department's senior leadership with the express goal[s] of: (i) providing strategic direction; (ii) ensuring that organizational mission and business objectives are achieved; (iii) ascertaining that risks are managed appropriately; and (iv) verifying that the organization's resources are used responsibly. NIST 800-39.
<b>High Value Asset (HVA)</b>	<p>An agency may designate Federal information or a Federal information system as an HVA when it relates to one or more of the following categories:</p> <ul style="list-style-type: none"> <li>(i) Informational Value – The information or information system that processes, stores, or transmits the information is of high value to the Government or its adversaries.</li> <li>(ii) Mission Essential – The agency that owns the information or information system cannot accomplish its Primary Mission Essential Functions (PMEF), as approved in accordance with Presidential Policy Directive 40 (PPD-40) National Continuity Policy, within expected timelines without the information or information system.</li> <li>(iii) Federal Civilian Enterprise Essential (FCEE) – The information or information system serves a critical function in maintaining the security and resilience of the Federal civilian enterprise.</li> </ul> <p>While agencies are principally responsible for designating their HVAs, OMB and DHS may also designate HVAs at agencies based on potential impact to national security. OMB M-19-03.</p>
<b>Impact</b>	With respect to security, the effect on organizational operations, organizational assets, individuals, other organizations, or the Nation (including the national security interests of the United States) of a loss of confidentiality, integrity, or availability of information or a system. With respect to privacy, the adverse effects that individuals could experience when an information system processes their PII. NIST SP 800-37, Revision 2.
<b>Information Security</b>	The protection of information and systems from unauthorized access, use, disclosure, disruption, modification, or destruction in order to provide confidentiality, integrity, and availability. NIST SP 800-37, Revision 2.
<b>Information Security Continuous Monitoring (ISCM)</b>	Maintaining ongoing awareness of information security, vulnerabilities, and threats to support organizational risk management decisions. NIST SP 800-137.
<b>Information System</b>	A discrete set of information resources organized for the collection, processing, maintenance, use, sharing, dissemination, or disposition of information. NIST SP 800-37, Revision 2.

<b>Integrity</b>	Guarding against improper information modification or destruction, and includes ensuring information non-repudiation and authenticity. NIST SP 800-37, Revision 2.
<b>Likelihood of Occurrence</b>	A weighted factor based on a subjective analysis of the probability that a given threat is capable of exploiting a given vulnerability or a set of vulnerabilities. NIST SP 800-30.
<b>Mission Essential Function</b>	The limited set of agency-level government functions that must be continued throughout or resumed rapidly after a disruption of normal activities. FEMA.gov.
<b>Organization</b>	An entity of any size, complexity, or positioning within an organizational structure (e.g., a federal agency or, as appropriate, any of its operational elements). NISTIR 8170.
<b>Plan of Action and Milestones (POA&amp;M)</b>	A document that identifies tasks needing to be accomplished. It details resources required to accomplish the elements of the plan, any milestones in meeting the tasks, and scheduled completion dates for the milestones. NIST SP 800-37, Revision 2.
<b>Primary Mission Essential Function (PMEF)</b>	Primary Mission Essential Functions (PMEFs) are those functions that need to be continuous or resumed within 12 hours after an event and maintained for up to 30 days or until normal operations can be resumed. PMEFs are validated by the Federal Emergency Management Agency (FEMA) National Community Coordinator. FEMA.gov.
<b>Residual Risk</b>	Residual risk is the remaining risk once a mitigation has been put into place. NISTIR 8286.
<b>Risk</b>	A measure of the extent to which an entity is threatened by a potential circumstance or event, and typically is a function of: (i) the adverse impact, or magnitude of harm, that would arise if the circumstance or event occurs; and (ii) the likelihood of occurrence. NIST SP 800-37, Revision 2.
<b>Risk Appetite</b>	The broad-based amount of risk an organization is willing to accept in pursuit of its mission/vision. It is established by the organization's most senior level leadership and serves as the guidepost to set strategy and select objectives. OMB A-123, Adapted.
<b>Risk Executive (function)</b>	An individual or group within an organization, led by the senior accountable official for risk management, that helps to ensure that: security risk considerations for individual systems, to include the authorization decisions for those systems, are viewed from an organization-wide perspective with regard to the overall strategic goals and objectives of the organization in carrying out its missions and business functions; and managing risk from individual systems is consistent across the organization, reflects organizational risk tolerance, and is considered along with other

	organizational risks affecting mission/business success. NIST SP 800-37, Revision 2.
<b>Risk Management</b>	The program and supporting processes to manage information security risk to organizational operations (including mission, functions, image, reputation), organizational assets, individuals, other organizations, and the Nation, and includes: (i) establishing the context for risk-related activities; (ii) assessing risk; (iii) responding to risk once determined; and (iv) monitoring risk over time. NIST SP 800-39.
<b>Risk Register</b>	A repository of risk information including the data understood about risks over time. NISTIR 8286.
<b>Risk Tolerance</b>	Risk tolerance is the acceptable level of variance in performance relative to the achievement of objectives. It is generally established at the program, objective or component level. In setting risk tolerance levels, management considers the relative importance of the related objectives and aligns risk tolerance with risk appetite. OMB Circular A-123, Adapted.
<b>SAORM (Senior Accountable Official for Risk Management)</b>	The senior official, designated by the head of each agency, who has vision into all areas of the organization and is responsible for alignment of information security management processes with strategic, operational, and budgetary planning processes. NIST SP 800-37, Revision 2.
<b>Security Control</b>	The safeguards or countermeasures prescribed for an information system or an organization to protect the confidentiality, integrity, and availability of the system and its information. NIST SP 800-37, Revision 2.
<b>System Development Life Cycle</b>	The scope of activities associated with a system, encompassing the system's initiation, development and acquisition, implementation, operation and maintenance, and ultimately its disposal that instigates another system initiation. NIST SP 800-37, Revision 2.
<b>Threat</b>	Any circumstance or event with the potential to adversely impact organizational operations, organizational assets, individuals, other organizations, or the Nation through a system via unauthorized access, destruction, disclosure, modification of information, and/or denial of service. NIST SP 800-37, Revision 2.
<b>Vulnerability</b>	Weakness in an information system, system security procedures, internal controls, or implementation that could be exploited or triggered by a threat source. NIST SP 800-37, Revision 2.





## Appendix D: Cybersecurity Risk Register

GSA's Cybersecurity Risk Register is maintained in the following Google Sheet. Access to this sheet is restricted due to the sensitivity of the data. The register was adapted from NISTIR 8286.

<https://docs.google.com/spreadsheets/d/1q4fsuyIHHE8mAremsz6tH6EGlJoht5FXoIbgrlaF6JA>

GSA will update the risk register, at a minimum, on a biannual basis. The fields in the risk register are summarized below, additional information is provided in the Google Sheet.

**Table D-1. Cybersecurity Risk Register Fields**

Field	Description
<b>ID (Risk Identifier)</b>	A sequential numeric identifier for referring to a risk in the risk register.
<b>Priority</b>	A relative indicator of the criticality of this entry in the risk register (High, Moderate, Low, Completed).
<b>Risk Tier</b>	The tier within the enterprise risk management process where the risk resides (Enterprise, Program/Business Line/Organization, Operations/System).
<b>Risk Area</b>	The risk area for the identified risk.
<b>Operational Risk Statement</b>	A brief description of the operational risk to GSA and other organizations.
<b>Risk Description</b>	A brief explanation of the cybersecurity risk scenario.
<b>Elevate to ERSI?</b>	Recommendation on whether the risk should be elevated to ERSI Board (Yes, No).
<b>Risk Category</b>	An organizing construct that enables multiple risk register entries to be consolidated. Example categories are NIST Control Families, CSF Functions, a business process, financial, etc.
<b>Impact</b>	The potential consequences resulting from this scenario if no additional response is provided.
<b>Likelihood</b>	The estimation of the probability, before any risk response, that this scenario will occur.
<b>Risk Rating</b>	A calculation of the likely risk exposure based on the inherent likelihood (Very High, High, Moderate, Low, Very Low).
<b>Risk Response Type</b>	The risk response for handling the identified risk.
<b>Risk Response Cost</b>	The estimated cost of applying the risk response
<b>Risk Response Description</b>	A brief description of the risk response.
<b>Risk Owner</b>	One or more parties that are responsible for managing and monitoring the selected risk response
<b>Status</b>	The current condition of this risk (In progress, Completed).

GSA aggregates, normalizes, and prioritizes risks in the cybersecurity risk register against risks identified in other risk registers like program management risk, budgetary risk, and legal liability risk. The resulting document is called a risk profile. GSA uses the risk profile to choose which enterprise risks to address and then to delegate responsibilities to appropriate risk owners.